

**MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES****TUBARI****26220089****1. Month of JUNE 1, 2008 THRU JUNE 30, 2008**

- |     |  |                                    |                                    |     |
|-----|--|------------------------------------|------------------------------------|-----|
| 2.  | Is Outlet # (8 digit) Correct?   | <input checked="" type="radio"/> Y | N                                  | N/A |
| 3.  | Is average Total flow-gal.day stated in space provided?                    | <input checked="" type="radio"/> Y | N                                  | N/A |
| 4.  | Is max. Total flow-gal day stated in space provided?                       | <input checked="" type="radio"/> Y | N                                  | N/A |
| 5.  | Is method used to calculate water stated?                                  | <input checked="" type="radio"/> Y | N                                  | N/A |
| 6.  | Are number of working days stated?   | <input checked="" type="radio"/> Y | N                                  | N/A |
| 7.  | Are there any parameters which have exceeded PVSC Local Limits?            | Y                                  | <input checked="" type="radio"/> N | N/A |
| 8.  | Is proper compliance/non-compliance statement provided?                    | <input checked="" type="radio"/> Y | N                                  | N/A |
| 9.  | Have correct number of samples been submitted?                             | <input checked="" type="radio"/> Y | N                                  | N/A |
| 10. | Has PHC result been listed on MR-1 report?                                 | Y                                  | <input checked="" type="radio"/> N | N/A |
| 11. | Has sample number been reported in space provided?                         | <input checked="" type="radio"/> Y | N                                  | N/A |
| 12. | Have all regulated parameters been listed on MR-1?                         | <input checked="" type="radio"/> Y | N                                  | N/A |
| 13. | Has sample type been stated on MR-1?                                       | <input checked="" type="radio"/> Y | N                                  | N/A |
| 14. | Have all samples been taken during this reporting period?                  | <input checked="" type="radio"/> Y | N                                  | N/A |
| 15. | Has NJDEPE certified lab been used?  | <input checked="" type="radio"/> Y | N                                  | N/A |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | <input checked="" type="radio"/> Y | N                                  | N/A |
| 17. | Have results been written in space designated on MR-1?                     | <input checked="" type="radio"/> Y | N                                  | N/A |
| 18. | Is correct method used to preserve samples stated on MR-1?                 | <input checked="" type="radio"/> Y | N                                  | N/A |
| 19. | Has MR-1 been signed by authorized representative?                         | <input checked="" type="radio"/> Y | N                                  | N/A |
| 20. | Has information been submitted on proper MR-1 form?                        | <input checked="" type="radio"/> Y | N                                  | N/A |
| 21. | Remove Arsenic from report if sampling not required                        | <input checked="" type="radio"/> Y | N                                  | N/A |

## MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

First Reviewer: comments on deficiencies Complete

Date Reviewed 7/31/08 Date sent to user \_\_\_\_\_

Date due back \_\_\_\_\_ Reviewer J. Sadana

Second review comments on deficiencies \_\_\_\_\_

Date Reviewed \_\_\_\_\_ Date sent to user \_\_\_\_\_

Date due back \_\_\_\_\_ Reviewer \_\_\_\_\_

Date \_\_\_\_\_ Reviewer \_\_\_\_\_

# PRETREATMENT MONITORING REPORT

NAME: TUBARI LTDMAILING ADDRESS: 90 DAYTON AVE BLDG - 4D - WEST PASSAIC, N.J.FACILITY LOCATION: SAMECATEGORY & SUBPART: 9999

OUTLET #:

NEW CUST ID: 2622 - 0079

OLD CUST ID: 2640 9071 36539 - 0451

CONTACT OFFICIAL: MARC BERMANTELEPHONE #: 973-779-8600

## MONITORING PERIOD

6	1	08	6	30	08
MO.	DAY	YR.	MO.	DAY	YR.
START			END		

For Reporting Period

Regulated Flow-gal/day

Average

Maximum

Total Flow-gal/day

Method used INDUSTRIAL GALLONS LESS 590

For Evaporation, less Domestic Gallons  
Divided By 21 Working Days

Production rate (if applicable)

PARAMETER		MASS LIMIT OR CONCENTRATION			# OF SAMPLES	SAMPLE COMP/G
		AVERAGE	MAXIMUM	UNITS		
Nickel	Sample Measurement	0.0100		Mg/L	1	COMP
	Permit Requirement	5.9		Mg/L	1	
Zinc	Sample Measurement	0.0124		Mg/L	1	COMP
	Permit Requirement	1.62		Mg/L	1	
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					

PVSC Form MR-1 Rev: 4 6/87 PI

Permit Requirement

Justification of Non-use if applicable (use additional sheets):

N/A

JUL 19 2008

Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every

parameter used:

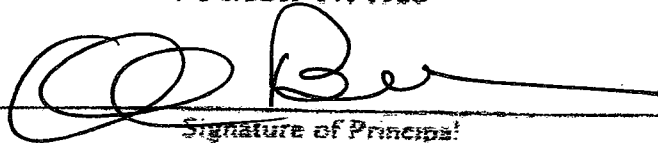
TUBARI LTD IS IN COMPLIANCE  
WITH LOCAL LIMIT METALS

Explain Method for preserving samples:

NITRIC ACID WITH A  
PH OF LESS THAN 2

I certify under penalty of law that this document and attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 52 FR 40610, October 17, 1988



Signature of Principal  
Executive or Authorized Agent

MARC BERMAN

Type Name and Title

7/17/08

Date

PVSC Form MR-1 Rev: 5 3/91 F2

Water reading

6/1/08 31065900

6/30/08 31277300

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 211,400

6/1/08 1035210

6/30/08 1040480

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 5270

211,400 less 5% For EVAPORATION = 200,830

200,830

- 5270 (DOMESTIC)

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 195560 (INDUSTRIAL)

98  
 21) 195560  
 189  
 65  
 63  
 26



QC Laboratories

## Analytical Report



MARC BERMAN  
TUBARI, LTD.  
90 DAYTON AVENUE  
BUILDING 4D WEST  
PASSIAC, NJ 07054

Regarding:

MARC BERMAN  
TUBARI, LTD.  
90 DAYTON AVENUE  
BUILDING 4D WEST  
PASSIAC, NJ 07054

Account No: 000382, TUBARI, LTD.  
Project No: 000382, TUBARI, LTD.

P.O. No:  
PWSID No:

Inv. No: 985933

Sample Number L2645793-1  
Sample Description DISCHARGE 24 HR COMPOSITE 6/25-26  
Samp. Date/Time/Temp 06/26/08 02:00pm NA F  
Sampled by Customer Sampled  
Received Temp 39 F Iced (Y/N): Y

Parameter	Method	Result	RLs	Test Date, Time, Analyst
NICKEL	EPA 200.7	ND mg/l	0.0100 mg/l	07/01/08 09:45AM B B
ZINC	EPA 200.7	0.0124 mg/l	0.00500 mg/l	07/01/08 09:45AM B B
BIOCHEMICAL OXYGEN DEMAND	SM 5210B	ND mg/l	2.49 mg/l	06/27/08 05:14PM GAP
TOTAL SUSPENDED SOLIDS	SM 2540D	10.4 mg/l	2.00 mg/l	06/30/08 07:45AM GLE

- A result of "ND" indicates the concentration of the analyte tested was either not detected or below the RLs.  
- All analysis, except field tests are conducted in Southampton, PA unless otherwise identified.  
- The test "pH lab" is analyzed upon receipt in the laboratory, the result will not be suitable for regulatory purposes.  
- Actual times of analysis for parameters reported <24 hrs are available upon request. All testing is completed within the required holding time unless otherwise noted.  
- Definitions: ND=not detected; NEG=negative; POS=positive; COL=colonies; RLs=Laboratory reporting limits; L/A=laboratory accident; TNTC=too numerous to count.  
- A result marked with "DRY" indicates that the result was calculated and reported on a dry weight basis.  
- QC NELAP ID's: PA 09-00131, NJ PA166, FL E87954, NY 11223, CT PH-0768, DE PA-018, KY 90228, MD 206, EPA PA00018. Bioassay: PA 09-03574, NJ PA034, FL E87953, KS E10373, SC 89020001.  
- QC STATE ID's: Wind Gap, NJ PA001, PA 48-01334; E RUTHERFORD NJ02015; Vineland NJ06005; Reading PA 06-03543.  
- All samples are collected as "grab" samples unless otherwise identified.  
- MCL= is the EPA recommended "maximum contaminant level" for a parameter, PLS=customer specific permit limits.  
Regulatory authorities are assessing substantial fines for testing omissions. Please track your sample collections and results on a weekly, monthly, or quarterly basis to ensure compliance. QC's internet program 'LIVE ACCESS' will provide you with real-time access to collection dates and results. Please contact Customer Service for further information on acquiring LIVE ACCESS.

*Thomas J. Hines*  
Thomas J. Hines, President

PVSC40 - 00004232